Dental Assisting Program
Application Fall 2014
Forms Packet

FORM 1 CONDITIONS FOR APPLICATION

Complete all portions of this form as directed. List name as indicated in myLane

L# _____   FIRST _____   LAST _____

E-mail - required _____1st – Phone- _____   2nd Phone _____

☐ All courses were taken at LCC

☐ Official Transcripts from other colleges have been submitted to Lane Enrollment Services – Attention: HP Transcript – Lane Community College - 4000 East 30th Ave, Eugene, OR 97405

Application Conditions and Program Progression Completion Requirements

In submitting my DA program application by email to HPApplicationCenter@lanecc.edu , I affirm the following:

- I took all of my prerequisite courses at Lane Community College,
  OR I have submitted official, sealed transcripts from colleges other than Lane to Lane Enrollment Services.

- I have completed the LCC Credit Admission process and have an L number.
  OR I have previously taken credit classes at Lane and have an L number.

- I have completed the Dental Assistant On-line Admissions Application & Payment process, including paying the **$35 non-refundable** application fee.

- I understand all information in the Fall 2014 Dental Assistant Application Information Packet. **I am NOT considered an applicant to the program unless all required forms and documentation are completed and submitted according to application instructions prior to the application deadline.**

- My application will not be returned and I am responsible for making a personal copy.

- I have read the Fall Enrollment Requirement Section and understand I must attend the mandatory orientation and comply with all other enrollment requirements if I am accepted or considered a program alternate.

- I am a current resident of the State of Oregon and my current Oregon address is listed in *myLane*.

- I understand it is my responsibility to complete all program requirements for degree completion.

- I understand I must successfully complete all DA prerequisites courses before Fall term 2014 to enter the program.

- I hereby attest that all application information and documentation I have submitted in this packet is accurate and authentic.

Forms 1 and 2 submitted scanned, Google docs, handwritten or delivered in person will not be accepted. Be sure to use the latest version of Adobe Reader to complete this Form.

Macintosh users – do not use "Preview" to view or complete this Form. Set Adobe Reader as the default PDF reader.

Submit all supporting documentation attached to ONE e-mail by the deadline: **HPApplicationCenter@lanecc.edu** **Health Professions Application Center** **Subject – Student Name L number DA Application Documentation** **Change to file name:** **DAForms2014LastNameLNumber**	**On the same date or before:** **Lane Transcript and/or submitted transcripts to Enrollment Services reflect courses and degree(s) listed on Point Petition Sheet.** **Online Dental Assistant Program Admissions Application and Payment has been submitted.**

FORM 2 POINT PETITION SHEET — Lane DA Fall 2014

See 2014 **Dental Assistant Application Information Packet** for application requirements and for **Course Equivalency & Transfer** requirements if course was not taken at Lane.

Courses <u>must meet</u> minimum credit requirement shown and <u>may not</u> exceed maximum credit shown. Enter grade point values in the right hand column 'Points' C- grades are ineligible

For points prerequisite courses must be completed and transcripted prior to application.	Course/School	Term/Year	# Credits	Grade C	Grade B	Grade A	Indicate Points Earned
Part 2A. Courses Required for Program Entry: *These courses must be completed prior to Fall entry if accepted to the program.*							
Item 1: Mathematics Requirement: *Lane placement testing must be within last 1 year*							
MTH 052, or higher (3 Cr or more),				6	9	12	
OR tested into MTH065, or higher				N/A	N/A	N/A	9
Item 2: Writing Requirement:							
WR 115, WR 121, WR 122 or WR 123 (3 / 4 Cr) OR				6	9	12	
Prior Bachelor's degree, must appear on a submitted transcript				N/A	N/A	N/A	12
Item 3: Choice of either Concepts of Computing OR Computer Fundamentals *within the last 5 years*							
CS 120 (4 Cr) OR				6	9	12	
CIS 101 (3 Cr)				4	8	10	
Item 4: Human Relations Requirement: *Human Relations prerequisites must be selected from list in catalog for Dental Assisting page 97*							
HR Requirement (3 Cr or more)				6	10	10	
Part 2B. Program Degree Courses:							
Item 5: Dentistry Law and Ethics							
DA 103 (2 Cr)				2	4	6	
Item 6: Choice of either Health Sciences OR both BI courses OR both HO courses: *within the last 5 years* *Mixed combinations do not count. Maximum of 12 points for this item, if BI or HO courses are taken add the two grade points.*							
DA 110 (3 Cr) **OR**				6	10	12	
BI 231 (4 Cr)				3	6	6	
AND BI 232 (4 Cr) **OR**				3	6	6	
HO 150 (3 Cr)				3	5	6	
AND HO 152 (3 Cr)				3	5	6	
Part 2C. Recommended Additional Courses additional admittance points given							
Items 7: Medical Terminology and Effective Learning Options:							
HO 100 (3 Cr)				4	8	10	
EL 115 or EL 115H or EL 115R (3 Cr)				2	6	6	
						Total Course Points Earned	
Part 2D. Additional Points.							
Prior college degree: Associate, bachelors, masters, or higher. Transcript must indicate degree granted.						= 3 pts	
Paid Dental Work Experience: Must be verified by pay stubs or W2s. Submit documentation. 415 or more hours						= 3 pts	
Indicate Total Points for Course Completion and Additional Points (*Points Possible 24 -86*)							

Be sure to do the Online Application and Payment Process to complete your final step to apply to the DA Program.
List any additional information that didn't fit into spaces provided above: